PTO/SB/05 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
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		Attorn	ey Docket No.	K2020.0005/P005						
ļ,	UTILITY	First I	nventor	Kunio Moriyama		0 - ~ -				
	ENT APPLICATION TRANSMITTAL	Title	PARTICLE B	EAM THERA	M THERAPHY SYSTEM					
(Only for new nonp	orovisional applications under 37 CFR 1.53(b)		ss Mail Label No.							
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO:  MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450							
2.	arrangement set forth below) iptive title of the invention Reference to Related Applications ment Regarding Fed sponsored R & D ence to sequence listing, a table, computer program listing appendix fround of the Invention Summary of the Invention Description of the Drawings (if filed) ed Description (s) act of the Disclosure (s) (35 U.S.C. 113) [Total Sheets atton [Total Sheets] atton [Total Sheets]  Ty executed (original or copy) by from a prior application (37 CFR 1.63(d)) continuation/divisional with Box 18 completed)  DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	19 l	8. Nucleotide a (if applicable a. Comput b. Specificati i. c. State)  9. Assignm 10. 37 CFR (when til 11. English 12. X Informal Stateme 13. Prelimin 14. X Return I (Should 15. X Certified (if foreign 16. Nonpub	M or CD-R in duplicer Program (Apper nd/or Amino Acid S, all necessary) outer Readable For on Sequence Listing CD-ROM or CD-Fments verifying idea of the company of the com	cate, large table or ndix) Sequence Submission Im (CRF) Ing on: R (2 copies); or ii. Intity of above copies PPLICATION PARTS sheet & document(s)) Intity of applicable Intity of applicable Intity of applicable Intity of above copies Intity of above copi	t)(B)(i). alent.				
6. Application Data Sheet. See 37 CFR 1.76										
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) of prior application No.:  Prior application information: Examiner Art Unit:  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.										
	19. CC	PRESPO	NDENCE ADDRE	SS						
X Custome	r Number: 2499	3		X Correspo	ondence address below					
Name DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Mark J. Thronson										
Address	Address 2101 L Street NW									
City Washington State		DC	Zip Code							
Country		elephone	(202) 785-970	)0   F	ax (202) 887-06	89				
Name (Print/Type) Mark J. Thronson Registration No. (Attorney/Agent) 33,082										
Signature MA			121	Date	March 3, 2004	}				

Date

March 3, 2004

PTO/SB/17 (10-03)
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				Complete if Known						
│ FEE TRANSMITTAL	1	Application Number Not Yet Assigned				<del>-</del>				
for EV 2004	Filing Date		Concurrently Herewith							
for FY 2004		First Named Inventor			entor	Kunio Moriyama				
Effective 10/01/2003, Patent fees are subject to annual revision.	Examiner Name					Not Yet Assigned				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit					N/A				
TOTAL AMOUNT OF PAYMENT (\$) 1,638.00					No.	K2020.0005/P005				
METHOD OF PAYMENT (check all that apply)	П	FEE CALCULATION (continued)								
Check X Credit Money Order Other None	3. ADDITIONAL FEES									
X Deposit Account:			_							
Deposit Account 04-1073	Larg Fee	e Entity Fee	Sn Fe	nall Entit						
Number	Code		Co			Fee Description	Fee Paid			
Deposit Account Dickstein Shapiro Morin &	1051	130	205	51 65	Surcharg	e – late filing fee or oath				
Name Oshinsky LLP The Director is authorized to: (check all that apply)	1052	50	205	52 25	Surcharg sheet.	e – late provisional filing fee or cover				
X Charge fee(s) indicated below X Credit any overpayments	1053	130	105	53 130	Non-Eng	lish specification				
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	181	12 2,52	0 For filing	a request for ex parte reexamination				
Charge fee(s) indicated below, except for the filing fee	1804	920*	180	04 920	. Request	ing publication of SIR prior to				
to the above-identified deposit account.	1805	1,840*	180	05 1,840	Request	ing publication of SIR after				
FEE CALCULATION	1251	110	225	51 55	Examine Extensio	r action n for reply within first month				
1. BASIC FILING FEE	1252	420	225	52 210		n for reply within second month				
Large Entity Small Entity	1253	950	225	53 475	Extensio	n for reply within third month				
Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	225	54 740	Extensio	n for reply within fourth month				
Code (\$)   Code (\$)	1255	2,010	225	55 1,00	5 Extensio	n for reply within fifth month	<del>                                     </del>			
1002 340 2002 170 Design filing fee	1401	330	240	01 165	Notice of	Appeal				
1003 530 2003 265 Plant filing fee	1402	330	240	02 165	Filing a b	rief in support of an appeal				
1004 770 2004 385 Reissue filing fee	1403	290	240	03 145	Request	for oral hearing				
1005 160 2005 80 Provisional filing fee	1451	1,510	145	•	0 Petition t	o institute a public use proceeding				
SUBTOTAL (1) (\$) 770.00	1452	110	245			o revive – unavoidable				
	1453	1,330	245			o revive - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE  Extra Fee from	1501	1,330	250		-	ue fee (or reissue)				
Claims below Fee Paid	1502	480	250							
Total Claims 30 -20** = 10 x 18.00 = 180.00	1503	640	250							
Claims	1460	130	146			to the Commissioner	<u></u>			
Multiple Dependent	1807	50	180			ng fee under 37 CFR 1.17(q)	<u> </u>			
Large Entity Small Entity	1806	180	180	06 180		ion of Information Disclosure Stmt				
Fee Fee Code (\$)  Fee Description	8021	40	802	21 40		g each patent assignment per (times number of properties)				
1202 18 2202 9 Claims in excess of 20	1809	770	280	9 385		Filing a submission after final rejection (37 CFR 1.129(a))				
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	281	10 385		For each additional invention to be				
1204 86 2204 43 ** Reissue independent claims	1801	770	280	01 385		examined (37CFR 1.129(b)) Request for Continued Examination (RCE)				
over original patent  1205 18 2205 9 ** Reissue claims in excess of 20		2 900 1802 900 Request for expedited examination of a design application								
and over original patent	Other	Other fee (specify)								
SUBTOTAL (2) (\$) 868.00	*Red	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00								
**or number previously paid, if greater; For Reissues, see above										
SUBMITTED BY						(Complete (if applicable))				
Name (Print/Type) Mark J. Thronson		ration No ey/Agent)		33,082		Telephone (202) 775-4742	}			

Signature